

EARLY VOTING BALLOT TRANSPORT STATEMENT

~This form is to be completed each time the ballot box LOCK is OPENED for ballot transport~

At Location

Election Type: General Election

Election Date: 11/08/2022

Name of Location: MCTEC-MARICOPA COUNTY ELECTIONS DEPARTMENT- DB - VC# 14136

AM

BOX 1 **OF** 2

Arrival Time: 8:15

Were there ballots to be picked up?



YES <If YES, complete lines 1-5



NO <If NO, complete lines 2-5

Completed Forms picked up?



YES



NONE

IS22005500 IS22005499
1) Red Box Seals # _____ **&** _____ <Indicate the seal numbers that were placed on ballot transport box

2) Ballot Box Sealed/Checked on (Date) 11/2/22 (Time) 8:16 <Date and time box was sealed/checked

3) Location Staff Member (Signature) Hanson

4) Transport Staff Member (Signature) [Signature]

5) Transport Staff Member (Signature) [Signature]

Departure Time: 8:18

Transport Receipt

This portion to be completed by the Receiving Agent at the MCTEC Facility

Receiving Agent (Signature) Caron Personke **Date/Time:** 11/2/2022 8:59
Sign to acknowledge receipt from Transport Staff Member Date of Audit Match

Ballot Box Seals # IS22005500 **&** IS22005499 <If applicable, verify the seal numbers on the box match the above from location

Count of Ballots in Transport Bin # 407

Audit Agent (Signature) [Signature] **Date/Time:** 11/2/22 9:00
Sign to affirm seal #'s match or that no ballots were to be picked up Date of Audit Match

